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Campaign Fund Report Summary of Receipts and Disbursements

Sh	eila M. Finlayson		Alderwom	an	4
Na	me of candidate o	r committee as filed with the election office	Office		Ward
1.	nk information Checking Other	Bank name Severn Bank			
Tra	nsaction period fr Due no later than	rom: November 8, 2017 n 4:30PM on the last day of each transaction p	to July 1, 20 period. (See Car		o for dates)
	•	distributed to (<u>4.44.040</u>):			
		ots and Disbursements		rh	4,508.69
1.		beginning of transaction period		\$	
2.	-	Schedule 1, column 4			
3.		Schedule 2, column 4		<u></u>	4,508.69
4.		able (Add lines 1, 2 and 3)		Φ	
5.		from Schedule 3: 3,155.0	9		
	Column 3	\$			
	Column 4				
_	Column 5			\$	3,155.09
6.	Total disbursen	end of transaction period (Subtract line 6 from	line 4)	¥ <u></u>	1,352.60
7.		ng obligations from Schedule 4	: IIIIO 47	\$	0.00
8. 9.		tions from Schedule 5, column 4		\$ \$	0.00
9 .	III-KIIIQ CONUNDA	Mons from ochedule o, column 4		· · · · · · · · · · · · · · · · · · ·	
an	d to the best of m	rjury, I declare that I have examined this rep y knowledge and belief it is true, correct and c committee, treasurer and chairman must sign r	omplete. (If rep	ccompanying schedu ort of candidate, cand	ies and statements, didate and treasurer
Ce	andidate A	iela M. Finlayon		Date 7-2-2018	3
	easurer	40 Cm		Date 7-2-2018	3
ΩL	odrman of Commi	ttoo or State		Date	

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Name of candidate or committee	Sheila M. Finlayson	
Report period - transactions from		to July 1, 2018

Schedule 1 - Contributions and Receipts

(Excluding Transfers, Loans and In-kind Contributions)

Date received	Complete name and residence address of Payer	Description of receipt. See instructions for code.		Amount	
	NONE	Code *	Ticket price	Cash	00.00
				Check#	
		* T, enter	r price per ticket	Rcpt #	
		Aggrega	te amount receiv	ed from Payer to date	
		Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	Rcpt #	
		Aggregat	te amount receive	ed from Payer to date	
		Code *	Ticket price	Cash	
				Check #	·-
		* T, enter	price per ticket	Rcpt #	
		Aggregate amount received from Payer t		ed from Payer to date	
		Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	Rcpt #	
		Aggregat	e amount receive	ed from Payer to date	
		Code *	Ticket price	Cash	
				Check#	
		* T, enter	price per ticket	Rcpt #	
		Aggregat	e amount receive	ed from Payer to date	
		Code *	Ticket price	Cash	
				Check#	
		* T, enter price per ticket Rcpt # Aggregate amount received from Payer to date			
		Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	Rcpt #	
		Aggregat	e amount receive	ed from Payer to date	

Total this page	\$	00.00	
, ,	-		

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Name of candidate or committee	Sheila M. Finlayson			
Report period - transactions from				
Schodule 2 - Loans and Transfore				

Date Complete name and residence received address of Payer		Description of loan	or transfer	Amount
	NONE	Aggregate amount of loan or transfer \$		0.00
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
.,		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		

Total this p	age \$	0.00

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Name of candidate or committee	Sheila M. Finlayson		
Report period - transactions from	November 8, 2017	to July 1, 2018	
•			

Schedule 3 - Disbursements

1	2	3			4			5		
		Salarie	es and all pay pay	yments othe /ments	r than Ioan	Loan payments		Transfers to other funds (candidate or		
Date	Payee and address	Code	Amount	Me	thod	Amount	M	lethod	committee name required) Amou	
	***PLEASE SEE			Check #			Check #			
	ATTACHED SHEET***			Cash			Cash			
				Rcpt#			Rcpt#		1	
				Check#			Check #			
				Cash			Cash		1	
		1 1		Rcpt#			Rcpt#		1	
·······		1 1		Check#			Check #			
				Cash			Cash		1	
				Rcpt#			Rcpt #		7	
		i i		Check#			Check #			
				Cash			Cash		1	
				Rcpt#	•		Rcpt #		1	
		1 1		Check#			Check #			
				Cash			Cash		1	
				Rcpt#			Rcpt #		1	

Totals this page \$ 3,155.09 0.00 0.00

City of Annapolis SCHEDULE 3-DISBURSEMENTS
Name of Candidate: SHEILA M. FINLAYSON WARD 4

Report period-transactions: from November 8, 2017 through July 1, 2018

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	OTHER	Advertisement	Reimbursement campaign expenses	Staff gifts	campaign expenses	campaign signage		\$500.00 1156 Reimbursement event expenses
	CHECK #	1150	1151	1152	1153	1154	1155	1156
	AMT CHECK CHECK #	\$110.00	\$2,096.36 1151	\$58.03	\$300.00	\$90.70		\$500.00
` 	CODE	겂	щ	0	U	П		ш
- ia - c - aby	ADDRESS	P. O. Box 6652 Annapolis, MD 21401	131 Brightview Drive Annapolis, MD 21401	1295 Annapolis Mali, Annapolis, MD 21401	8 Streamwood Court, Annapolis, MD 21403	913 Commerce Drive, Annapolis, MD 21401		131 Brightview Drive Annapolis, MD 21401
	NAME	The Annapolis Links, Inc	Sheila M. Finlayson	Macy's	Anthony Spencer	Sign by Tomorrow	VOIDED	Sheila M. Finlayson
	DATE	12/1/17	12/15/17	12/18/17	1/5/18	1/12/18		3/19/18

GRAND TOTAL SCHEDULE 3 ****

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		ons as of End of Report Period	
Report period - transactions from	November 8, 2017	to July 1, 2018	
Name of candidate or committee	Sheila M. Finlayson		
DDS/CO n according to the control of the control of			,

2	3	4
Description of debt (Loans, unpaid bills, etc.)	Date debt incurred	Amount
		0.00
, , , , , , , , , , , , , , , , , , , ,		
		,
	Description of debt (Loans, unpaid bills, etc.)	Description of debt (Loans, unpaid bills, etc.) Date debt incurred

Total this page	\$ 00.00

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Name of candidate or committee	Sheila M. Finlayson	
Report period - transactions from		

Schedule 5 - In-kind Contributions

1	2	3	4
Date	Name and address of contributor	Description of In-kind Contribution	Fair Market Value (during this report period)
	NONE		00.00
·			
		·	
	·		

Total this page	\$ 00.00	